Declaration and Power of Attorney for Patent Application

As below named inventors, we hereby declare that:

Our residences, post office addresses and citizenships are as stated below next to our names,

We believe that we are the original, first and joint inventors of the subject matter which is claimed and for which a patent is sought on the invention entitled **SOFTWARE ANALYSIS TOOL FOR CDMA SYSTEM**, the specification of which

	[)	(]	is attached hereto.	
(Check one)				
]]	was filed on Application Serial Number and was amended on	as
				(if applicable)

We hereby state that we have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

We acknowledge the duty to disclose to the U.S. Patent and Trademark Office all information known to us which is material to patentability (as defined in C.F.R. §1.56) in connection with the examination of this application.

We hereby claim foreign benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign /	Application(s)		<u>Priority</u>	Claimed
NONE (Number)	(Country)	(Day/Month/Year Filed)	[] YES	[] NO
(Number)	(Country)	(Day/Month/Year Filed)	[] YES	[] NO
(Number)	(Country)	(Day/Month/Year Filed)	[] YES	[] NO

Declaration and Power of Attorney for Patent Application

We hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, we acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

NONE (Application Serial No.)	(Filing Date)	(Status: Patented/Pending/Abandoned)
(Application Serial No.)	(Filing Date)	(Status: Patented/Pending/Abandoned)
		int the following agents/attorneys to prosecute I Trademark Office connected therewith.

And I also hereby appoint the Attorneys and Patent Agents of **Coats & Bennett, P.L.L.C.**, as identified by **Customer Number 24112** in the records of the United States Patent and Trademark Office and as updated from time to time, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.



| 18811# 11811 91881 11881 11810 1181 1881

Send Correspondence to:	Michael D. Murphy
Direct Calls to:	Michael D. Murphy

0:1...

Declaration and Power of Attorney for Patent Application

We hereby declare that all statements made herein of our own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SOLE OR FIRST INVENTOR:

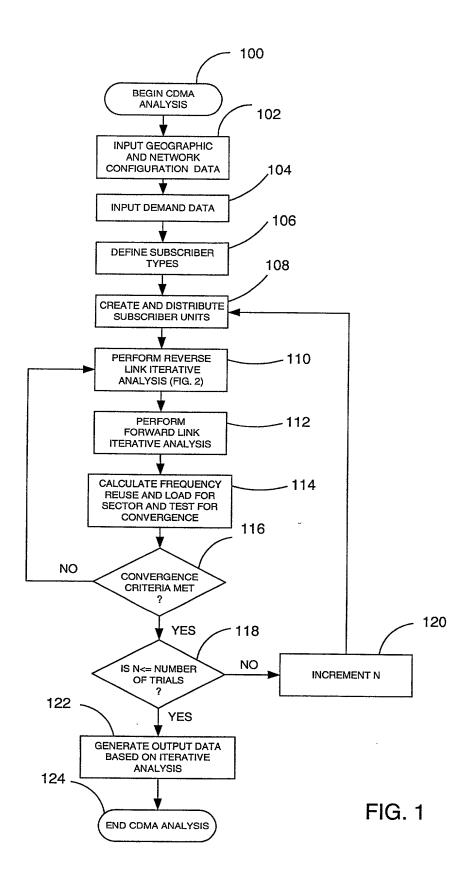
Full manage

-un name	Juan		υ.		Siiva
	First Name		Middle Name/Initial		Last Name
Signature:				Date:	
<u> </u>	First Name	Middle Name	Last Name	_	Year-Month-Day
Residence:	San Diego, Ca	lifornia United	States		
	City, State, and	l Country			
Citizenship:	Argentina				
ost Office A	idress: 108	359 Caminito A	Ivarez, San Diego, CA	92126	
SECOND INV	ENTOR IE ANV-				
SECOND INV	ENTOR, IF ANY:				
					Ruth
	ENTOR, IF ANY: Todd First Name		Middle Name/Initial		Ruth Last Name
full name:	Todd First Name				Last Name
full name:	Todd First Name				Last Name
Full name:	First Name	Middle Name	Last Name	Date:_	Last Name Year-Month-Day
Full name:	Todd First Name First Name Valley Center,	Middle Name California Uni		Date:_	Last Name Year-Month-Day
Full name:	First Name	Middle Name California Uni	Last Name	Date:_	Last Name Year-Month-Day
Full name: Signature: Residence:	First Name First Name Valley Center, City, State, and	Middle Name California Uni Country	Last Name	Date:_	Last Name Year-Month-Day

Declaration and Power of Attorney for Patent Application

THIRD INVENTOR, IF ANY:

Full name:	Reza			Shahidi		
	First Name		Middle Name/Initial		Last Name	
Signature:				Date:_		
	First Name	Middle Name	Last Name		Year-Month-Day	
Residence: San Diego, California United City, State, and Country			States			
Citizenship:	Iran	·				
Post Office Ac	Hdraee: 5070	Saachasa Straat	San Diego, CA 9213	n		



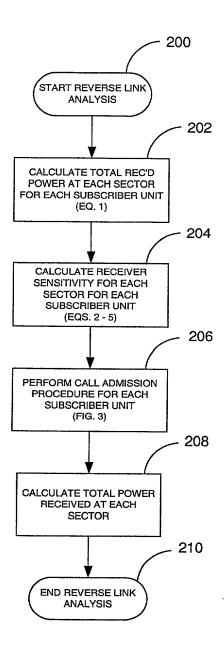
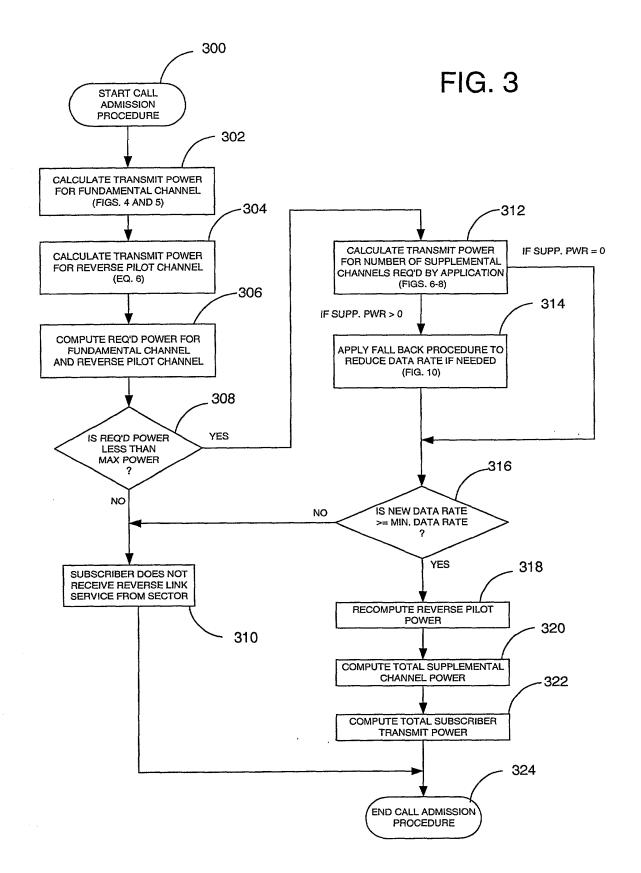
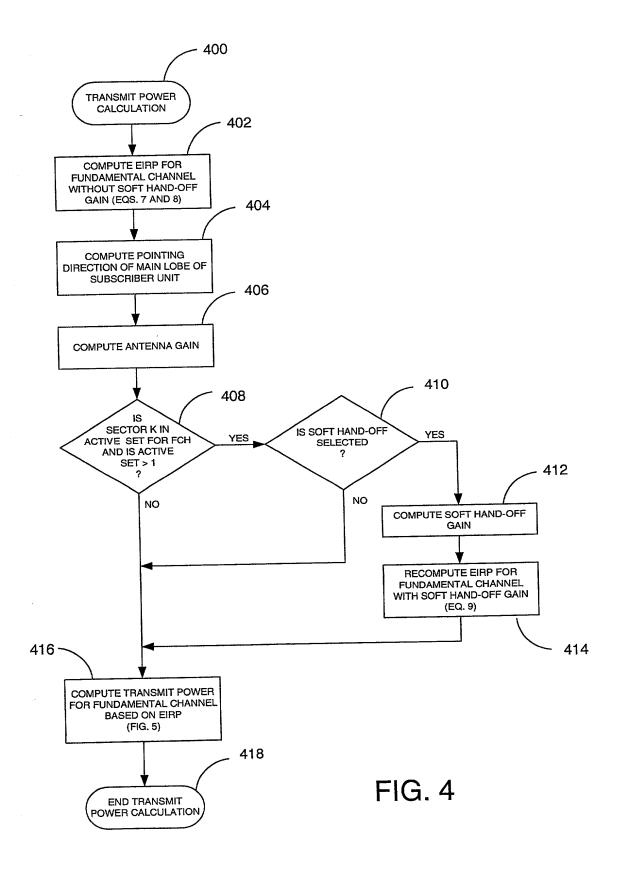


FIG. 2





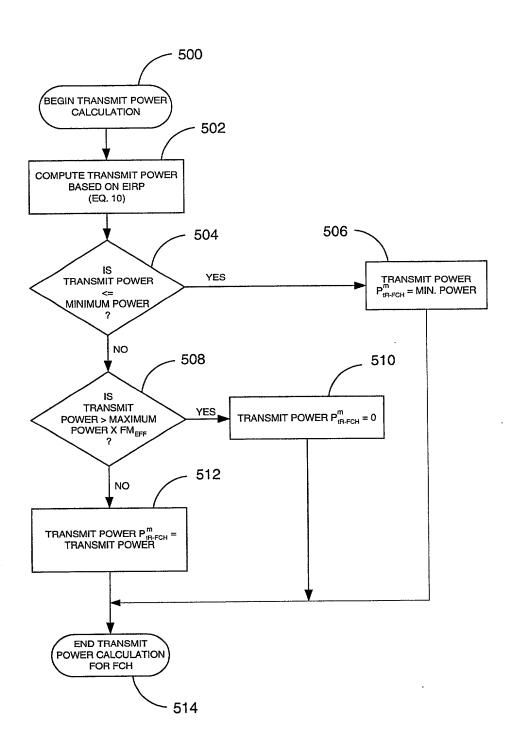
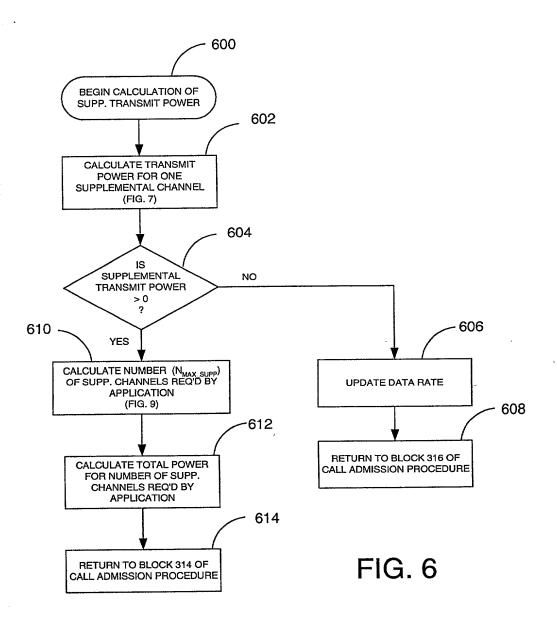
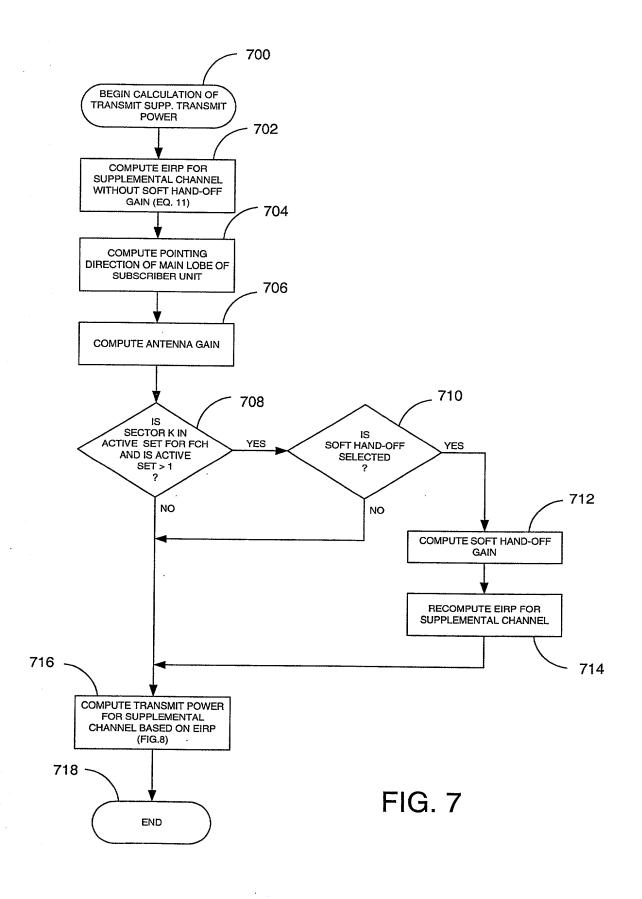


FIG. 5





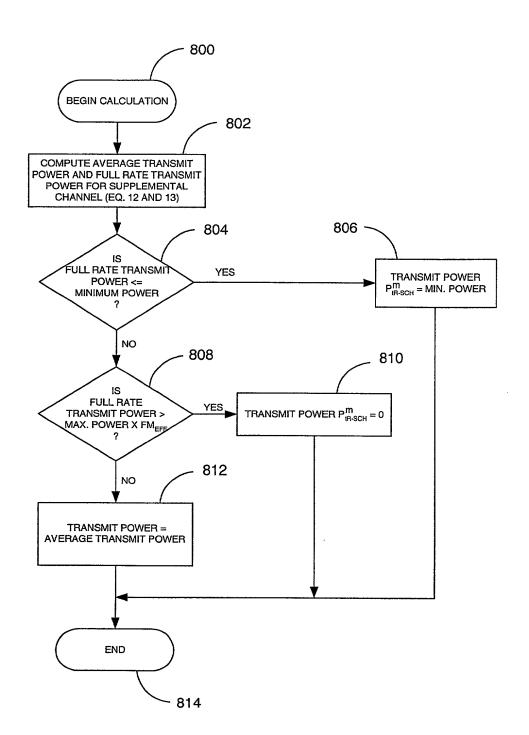


FIG. 8

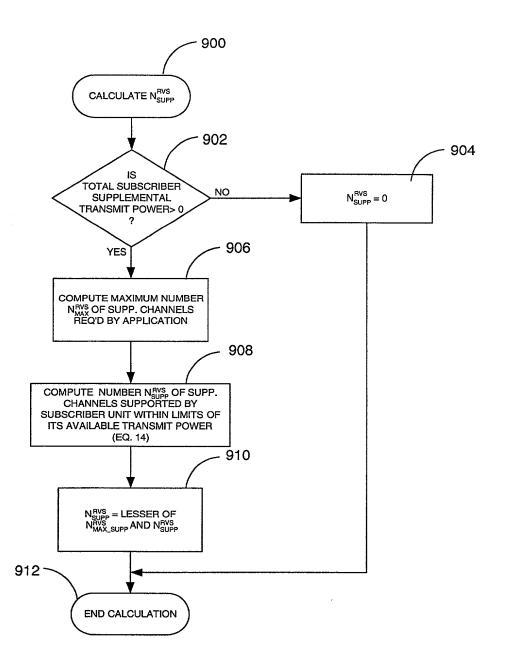
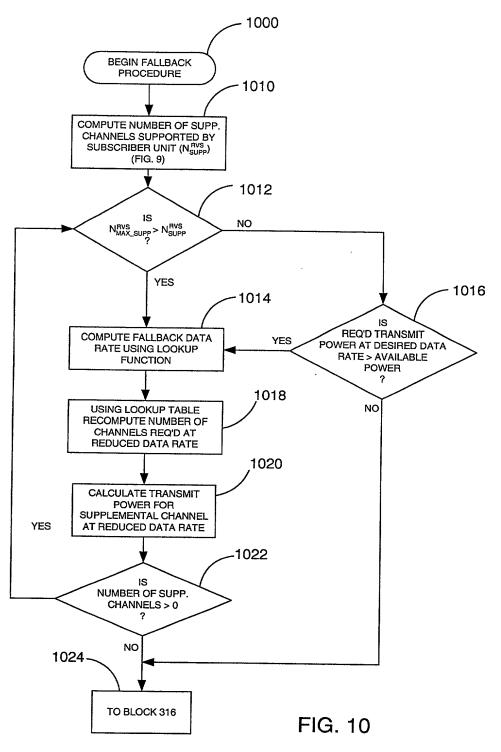
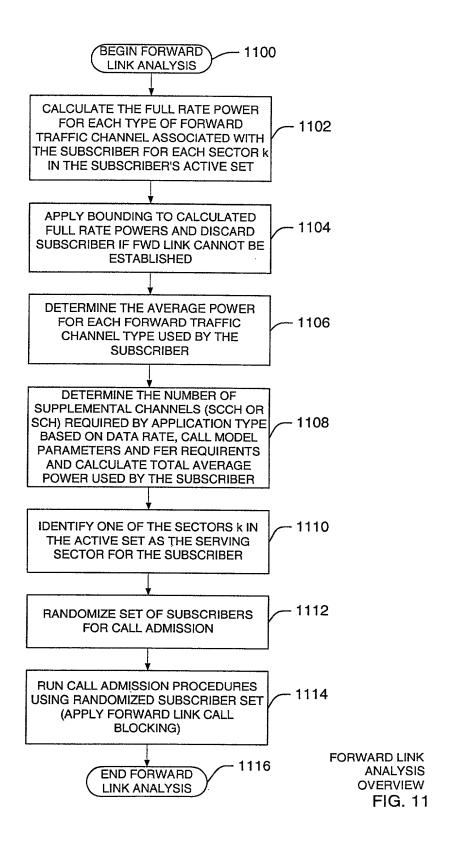
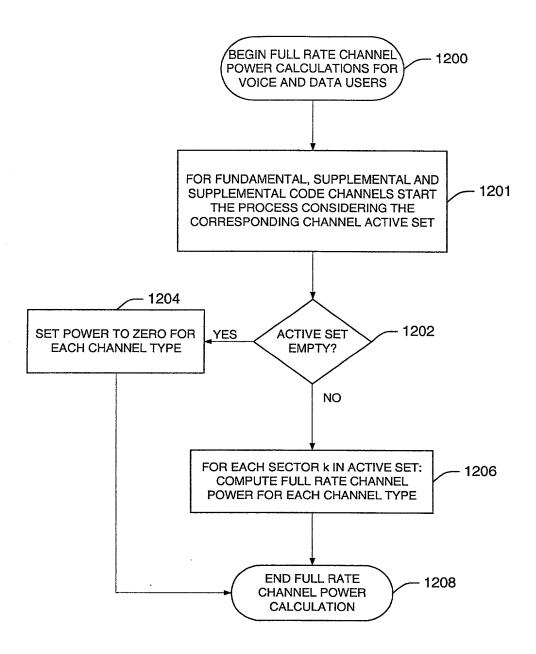


FIG. 9



FALLBACK PROCEDURE





FULL RATE FORWARD TRAFFIC CHANNEL CALCULATIONS FIG. 12

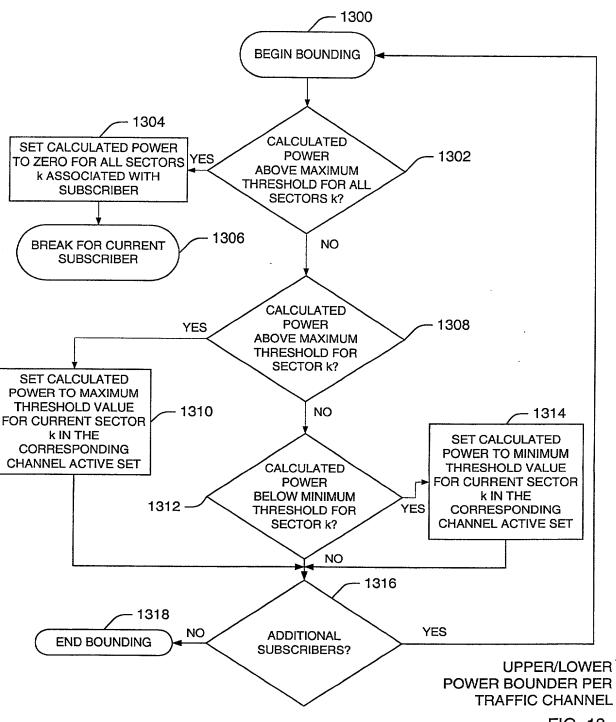
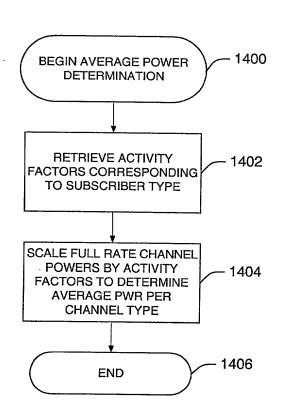
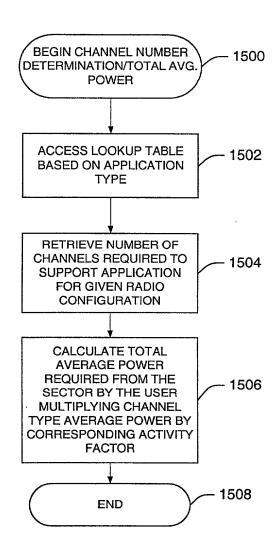


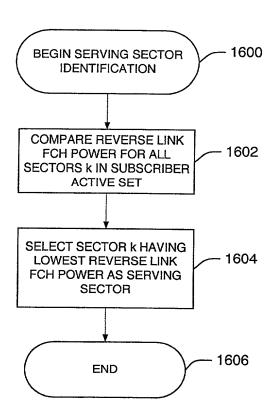
FIG. 13



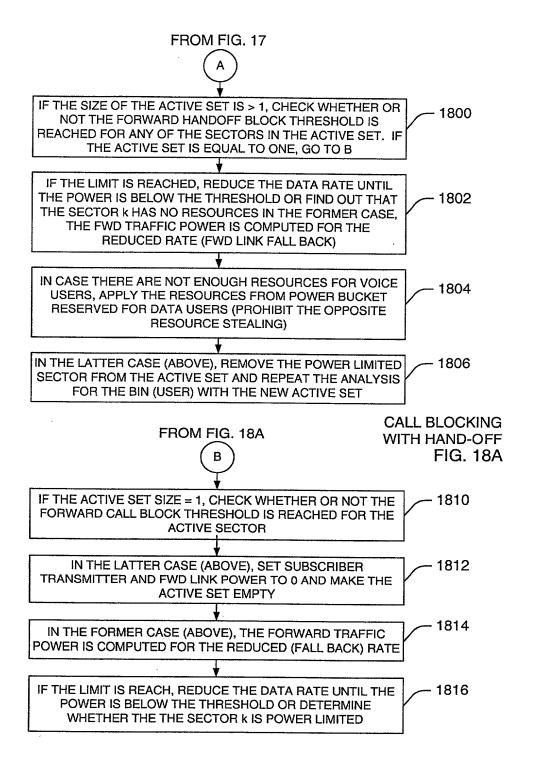
DETERMINE AVERAGE POWER PER FORWARD CHANNEL TYPE FIG. 14



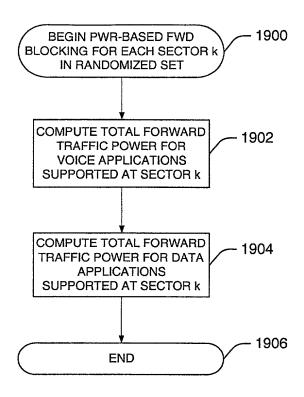
DETERMINE TOTAL AVERAGE POWER PER SUBSCRIBER FIG. 15

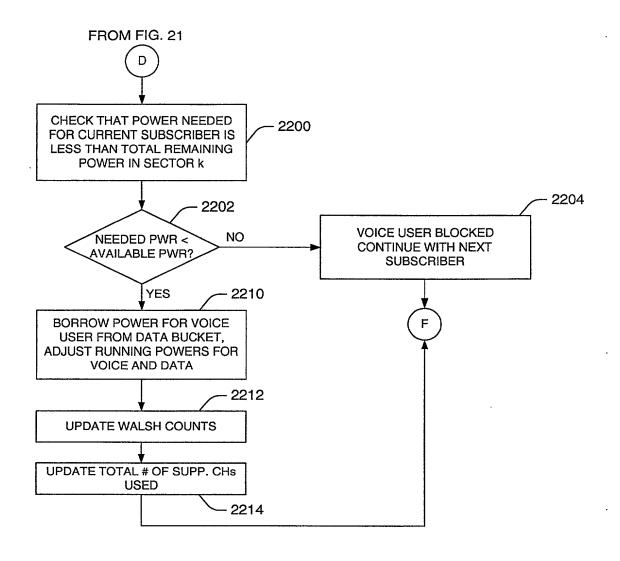


IDENTIFY SERVING
SECTOR FOR TWOWAY
COMMUNICATIONS PER
SUBSCRIBER
FIG. 16

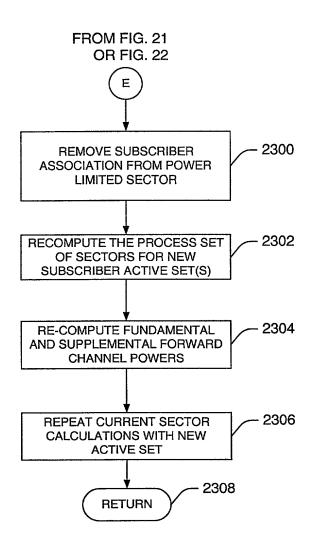


CALL BLOCKING, NO HAND-OFF FIG. 18B

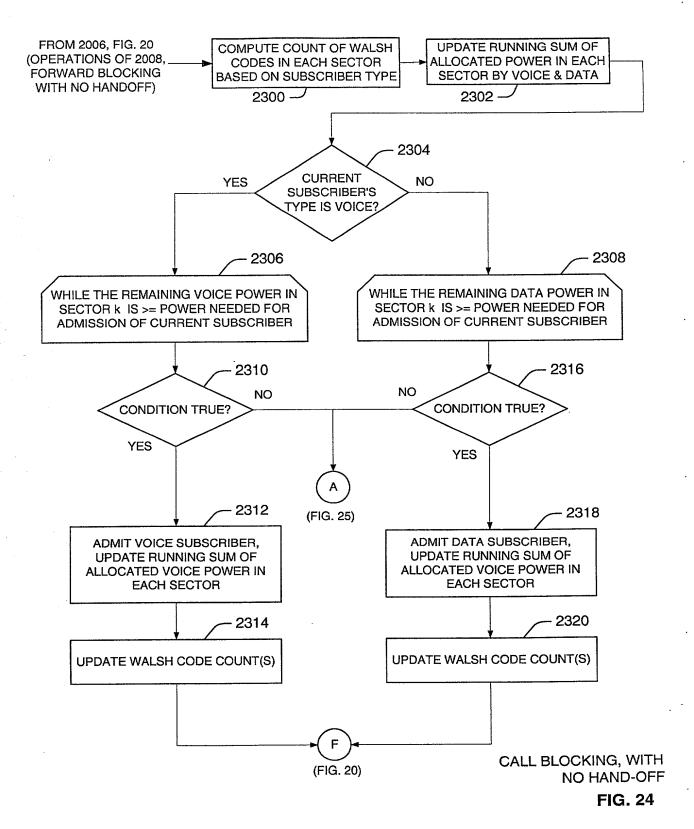


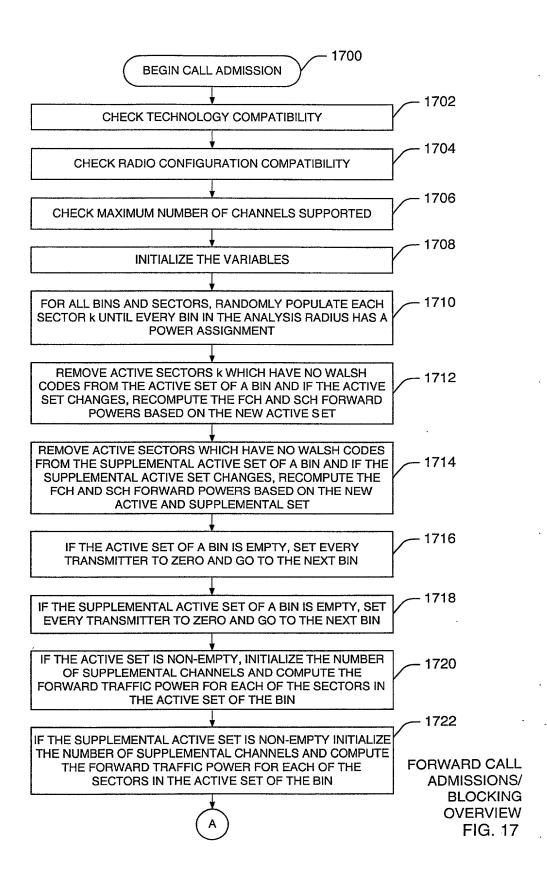


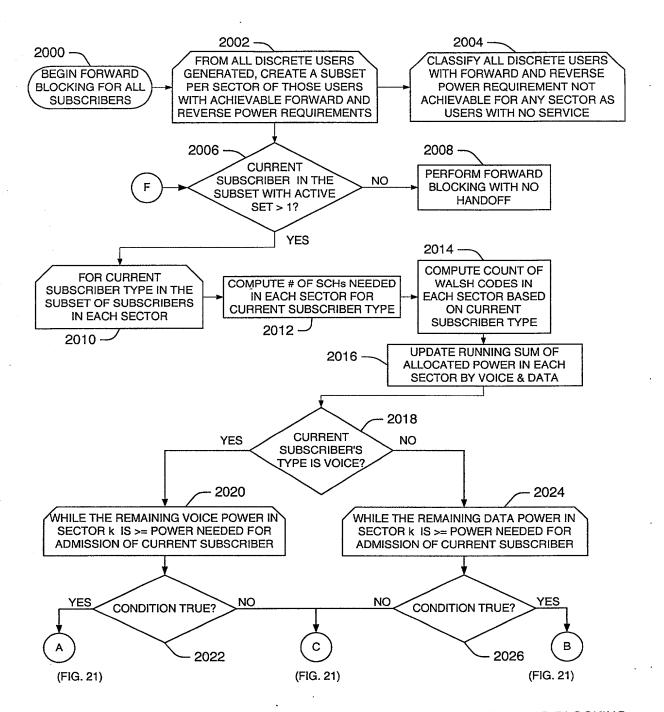
VOICE SUBSRIBER CALL ADMISSION VOICE BUCKET CHECK FIG. 22



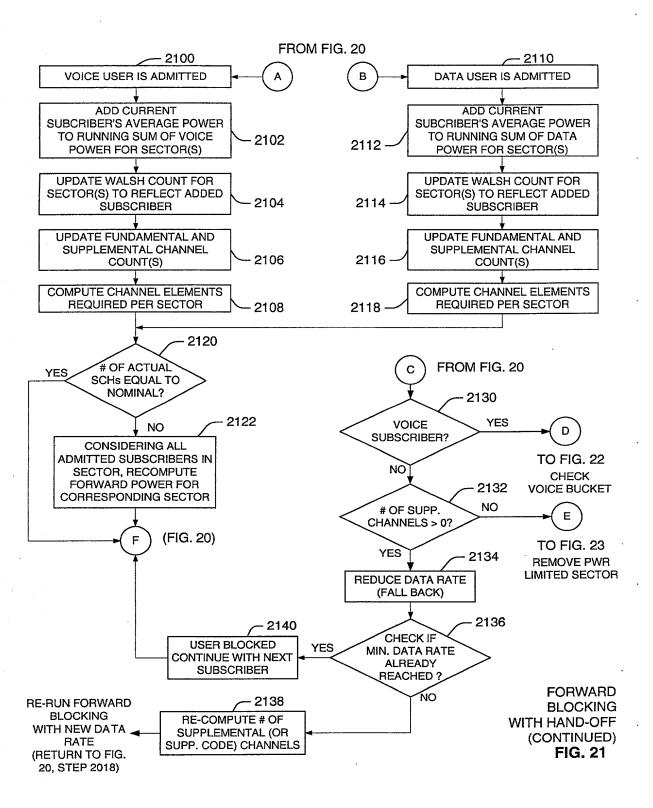
REMOVE POWR LIMITED SECTOR FIG. 23

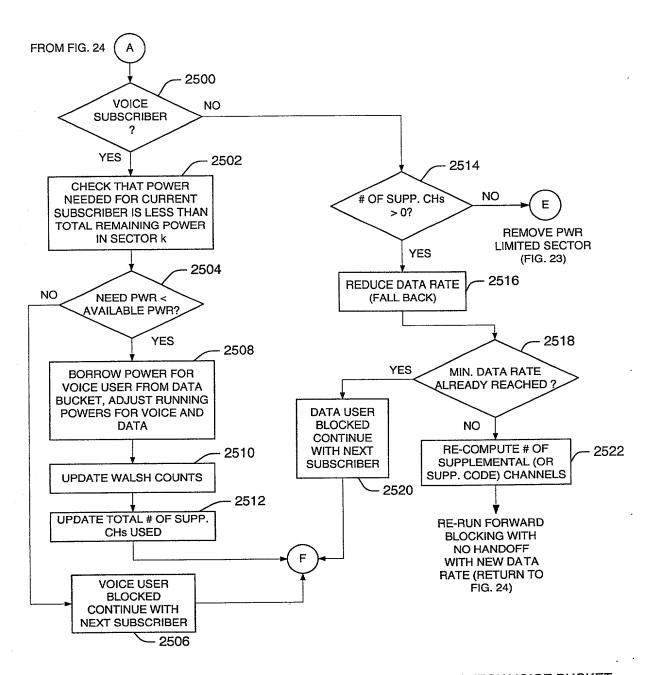






FORWARD BLOCKING DETAILS (WITH HAND-OFF) FIG. 20





CHECK VOICE BUCKET (BLOCKING WITH NO HAND-OFF CONTINUED)

FIG. 25

As below named inventors, we hereby declare that:

Our residences, post office addresses and citizenships are as stated below next to our names,

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(Check one)				
	[]	was filed on Application Serial Number and was amended on	as
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(Number)	(Country)	(Day/Month/Year Filed)	[] YES	[] NO
(Number)	(Country)	(Day/Month/Year Filed)	[] YES	[] NO

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NONE		
(Application Serial No.)	(Filing Date)	(Status: Patented/Pending/Abandoned)
(Application Serial No.)	(Filing Date)	(Status: Patented/Pending/Abandoned)

Power of Attorney: As a named inventor, I hereby appoint the following agents/attorneys to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

David G. Matthews Reg. No. 33,959 Dang Vo

Reg. No. 45,183

And I also hereby appoint the Attorneys and Patent Agents of **Coats & Bennett, P.L.L.C.**, as identified by **Customer Number 24112** in the records of the United States Patent and Trademark Office and as updated from time to time, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.



I TRATLE HIRM BIRRI EIRRI TIRRI TIRIK EKRI ERRE

Send Correspondence to:

Michael D. Murphy

Direct Calls to:

Michael D. Murphy

We hereby declare that all statements made herein of our own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SOLE OR FIRST INVENTOR:

Full name:	<u>Juan</u>		J		Silva
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Signature:				Date:_	
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Residence:	San Diego, C	alifornia United	States		
	City, State, an	d Country			
Citizenship:	Argentina				
Post Office Ad	ldress:1	0859 Caminito A	Ivarez, San Diego, CA	92126	
SECOND INV	ENTOR, IF ANY	':			
	•				Ruth
ruii name	First Name		Middle Name/Initial		
Signature:				Date:	
o.g. a.a.o	First Name	Middle Name	Last Name		Year-Month-Day
Residence:	Valley Center	r, California Uni	ted States		
· · · · · · · · · · · · · · · · · · ·	City, State, an				
Citizenship:	United States	3			
Post Office Ad	dress: 3021 9	Cole Grade Ro	ad, Valley Center, CA	92082	

Full name:	Reza		Shahidi		
	First Name		Middle Name/Initial		Last Name
Signature:				Date:	
	First Name	Middle Name	Last Name		Year-Month-Day
Residence:	San Diego, C	California United	States		
	City, State, ar	nd Country			

Post Office Address: 5070 Seachase Street, San Diego, CA 92130

THIRD INVENTOR, IF ANY:

Citizenship: Iran